

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL059017</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>06/25/2015</b>
NAME OF PROVIDER OR SUPPLIER  <b>MCDOWELL ASSISTED LIVING</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>5235 NC 226 SOUTH MARION, NC 28752</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments  Report of Biennial Construction Survey by Dennis Harrell on 6-25-2015.  Records indicate that this facility was first licensed on 2-1-1970, for 54 beds. Based on this information, we are requiring the facility to meet the 1967 NC State Building Code, the 1971 Minimum and Desired Standards and Regulations for Homes for the Aged and Infirm and the applicable portions of the current Rules for Adult Care Homes of Seven or More Beds.	C 000		
C 111	Must Have Current San. & Fire Safety Reports  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION( f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review.  This Rule is not met as evidenced by: 1. Based on a review of documents, the required annual fire alarm system inspection report could not be located. Fire alarm systems that are not inspected and approved as required could result in the fire alarm system not operating properly in the event of an actual fire.  2. Based on a review of documents, the required annual sanitation inspection report for the building could not be located.	C 111		
C 189	Building Equipment Maintained Safe, Operating  SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER	C 189		

Division of Health Service Regulation

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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C 189	<p>Continued From page 1</p> <p><b>REQUIREMENTS</b></p> <p>(a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition.</p> <p>(k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Based on observation, a corridor door could not close and latch to resist the passage of fire and smoke. Corridor doors that do not close completely and latch present the possibility that a fire that begins in one space can quickly spread to the corridor and the remainder of the facility. Findings include: The door to room 7 would not close and latch because it had sagged in the frame.</p> <p>2. Based on observation, the facility was not being maintained in a safe condition because of a clogged relief pipe on a water heater. A clogged relief pipe could cause the water heater to explode under certain conditions. Findings include: The relief valve on the water heater in the laundry was piped to the outside. Insects had built a nest in the open end of the relief valve clogging it so water could not flow. Note, this deficiency was corrected during the survey.</p> <p>3. Based on a review of documents, the fire extinguishers are not being inspected monthly as required. Failure to perform monthly safety inspections could cause the extinguishers to fail to work when needed. Findings include: The fire extinguishers had not been inspected this</p>	C 189		

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C 189	Continued From page 2  year.  4. Based on observation, the facility is not being maintained in a safe condition because of an improper electrical connection in the corridor. Improper electrical connections could expose residents and staff to energized wires. Findings include: The electrical connections to the battery operated emergency light in the corridor near the laundry were exposed and not done in an approved junction box as required.	C 189		